

FINANCIAL AFFIDAVIT	
IN SUPPORT OF REQUEST FOR ATTORNEY, EXPERT OR OTHER COURT SERVICES WITHOUT PAYMENT OF FEE	
IN THE CASE OF UNITED STATES V.S. <u>Derek Frazier</u>	IN UNITED STATES MAGISTRATE DISTRICT <input type="checkbox"/> APPEALS COURT or <input type="checkbox"/> OTHER PANEL (Specify below) FOR _____ AT _____
PERSON REPRESENTED (Show your full name) _____	LOCATION NUMBER <div style="border: 1px solid black; height: 30px; width: 100%;"></div>
CHARGE/OFFENSE (describe if applicable & check box →) _____ _____ _____	DOCKET NUMBERS Magistrate District Court <u>CR03-10368</u> Court of Appeals
1 Defendant—Adult 2 <input checked="" type="checkbox"/> Defendant—Juvenile 3 <input type="checkbox"/> Appellant 4 <input type="checkbox"/> Probation Violator 5 <input type="checkbox"/> Parole Violator 6 <input type="checkbox"/> Habeas Petitioner 7 <input type="checkbox"/> 2255 Petitioner 8 <input type="checkbox"/> Material Witness 9 <input type="checkbox"/> Other	Felony <input type="checkbox"/> Misdemeanor <input checked="" type="checkbox"/>

ANSWERS TO QUESTIONS REGARDING ABILITY TO PAY

ASSETS	EMPLOYMENT	Are you now	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	<input type="checkbox"/> Am Self-Employed								
		Name and address of employer: _____											
		IF YES, how much do you earn per month? \$ _____		IF NO, give month and year of last employment _____									
		If married is your Spouse employed? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		If a minor under age 21, what is your Parents or Guardian's approximate monthly income? \$ _____									
OTHER INCOME	Have you received within the past 12 months any income from a business, profession or other form of self-employment, or in the form the form of rent payments, interest, dividends, retirement or annuity payments, or other sources? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No												
	RECEIVED		SOURCES										
	IF YES, GIVE THE AMOUNT RECEIVED & IDENTIFY THE SOURCES												
	<table style="width:100%; border-collapse: collapse;"> <tr> <td style="width: 40%; border-bottom: 1px solid black;"></td> <td style="width: 10%; text-align: center; border-bottom: 1px solid black;">\$</td> <td style="width: 50%; border-bottom: 1px solid black;"></td> </tr> <tr> <td style="border-bottom: 1px solid black;"></td> <td style="text-align: center; border-bottom: 1px solid black;"></td> <td style="border-bottom: 1px solid black;"></td> </tr> <tr> <td style="border-bottom: 1px solid black;"></td> <td style="text-align: center; border-bottom: 1px solid black;"></td> <td style="border-bottom: 1px solid black;"></td> </tr> </table>						\$						
	\$												
CASH	Have you any cash on hand or money in savings or checking accounts? <input type="checkbox"/> Yes <input type="checkbox"/> No IF YES, state total amount \$ _____												
	PROPERTY	Do you own any real estate, stocks, bonds, notes, automobiles, or other valuable property (excluding ordinary household furnishings and clothing)? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>											
IF YES, GIVE THE VALUE AND \$ DESCRIBE IT		DESCRIPTION											

OBLIGATIONS & DEBTS	DEPENDENTS	MARITAL STATUS	Total No. of Dependents	List persons you actually support and your relationship to them													
		<input type="checkbox"/> SINGLE <input checked="" type="checkbox"/> MARRIED <input type="checkbox"/> WIDOWED <input type="checkbox"/> SEPARATED OR DIVORCED	1	<u>Derek Lamont Frazier - Son</u> _____ _____													
		<table style="width:100%; border-collapse: collapse;"> <tr> <th style="width: 40%; text-align: left;">CREDITORS</th> <th style="width: 20%; text-align: center;">Total Debt</th> <th style="width: 40%; text-align: center;">Monthly Payment</th> </tr> <tr> <td style="border-bottom: 1px solid black;">APARTMENT OR HOME:</td> <td style="text-align: center; border-bottom: 1px solid black;">\$ _____</td> <td style="text-align: center; border-bottom: 1px solid black;">\$ _____</td> </tr> <tr> <td style="border-bottom: 1px solid black;"></td> <td style="text-align: center; border-bottom: 1px solid black;">\$ _____</td> <td style="text-align: center; border-bottom: 1px solid black;">\$ _____</td> </tr> <tr> <td style="border-bottom: 1px solid black;"></td> <td style="text-align: center; border-bottom: 1px solid black;">\$ _____</td> <td style="text-align: center; border-bottom: 1px solid black;">\$ _____</td> </tr> </table>				CREDITORS	Total Debt	Monthly Payment	APARTMENT OR HOME:	\$ _____	\$ _____		\$ _____	\$ _____		\$ _____	\$ _____
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APARTMENT OR HOME:	\$ _____	\$ _____															
	\$ _____	\$ _____															
	\$ _____	\$ _____															
DEBTS & MONTHLY BILLS <small>(LIST ALL CREDITORS INCLUDING BANKS, LOAN COMPANIES, CHARGE ACCOUNTS, ETC.)</small>																	

I certify under penalty of perjury that the foregoing is true and correct. Executed on (date)

SIGNATURE OF DEFENDANT
(OR PERSON REPRESENTED)Derek Frazier12/18/03